

## **Supplemental Food Complaint Report Form**

**TO REGISTER A COMPLAINT ABOUT THE QUALITY OF USDA FOOD PRODUCT, SUBMIT THIS FORM TO THE KENTUCKY DEPARTMENT OF AGRICULTURE. RETAIN A COPY FOR YOUR RECORDS.**

Name of Recipient Agency: \_\_\_\_\_

Contact person: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Commodity: \_\_\_\_\_ Pack Size: \_\_\_\_\_

Date Packed: \_\_\_\_\_ Date Received: \_\_\_\_\_

Contract Number(s): \_\_\_\_\_

Lot Number(s)/Can code(s) (if available) \_\_\_\_\_

Amount Received: \_\_\_\_\_ Amount Used: \_\_\_\_\_ Balance on Hand: \_\_\_\_\_

Is the Commodity Still Being Used?      Yes \_\_\_\_\_ No \_\_\_\_\_  
(Check One)

Location of Commodity: \_\_\_\_\_

Number of cases of Commodity Unfit for Consumption ( your judgment): \_\_\_\_\_

Specific Comments (if any): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**Mail or Fax to:**

**Kentucky Department of Agriculture  
Division of Food Distribution  
107 Corporate Drive  
Frankfort, KY 40601  
(502) 573-0304**

